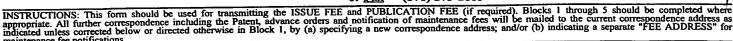
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax



indicated unless corrected be maintenance fee notifications	elow or directed otherwise	in Block 1, by (a)	specifying a	new correspondence address;			
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 12/15/2005 OPE				Note: A certificate of Fee(s) Transmittal. The papers. Each additional have its own certificate.	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Lichti Lempert & Lasch Bergwaldstr 1 Karlsruhe, D-76227 MAR 0 6 2006				Cer I hereby certify that th States Postal Service v addressed to the Mai transmitted to the USP	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
GERMANY A TRADE			45E/			(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	F	IRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/088,172	03/15/2002	<u> </u>	Georg W	/eihrauch	18916.2	1483	
· ·	RUSH,ESPECIALLY A TO	OTHBRUSH					
	1						
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$0	\$1400	03/15/2006	
		ART UNI	T	CLASS-SUBCLASS	7		
EXAMINER		1744		015-167100	J		
ВАНТА, А			<u> </u>				
1. Change of correspondence address or indication of "Fee Address" (CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custon Number is required.			(1) the na or agents (2) the na registered 2 registered	reprinting on the patent front page, list the names of up to 3 registered patent attorneys ents OR, alternatively, the name of a single firm (having as a member a tered attorney or agent) and the names of up to istered patent attorneys or agents. If no name is it, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON T	HE PATEN	T (print or type)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment 187/07/2006 MBEYENE2 0000033 500698 10088172							
(A) NAME OF ASSIGNEE CORONET-Werke GmbH				CE: (CITY and STATE OR CO 83 Wald-Michel EP. GERMANY	lbach		
Please check the appropriate	assignee category or category	ories (will not be pri	nted on the	patent): 🔲 Individual 🞾 C	Corporation or other private gr	oup entity Government	
4a. The following fee(s) are enclosed:				p. Payment of Fee(s):			
Issue Fee			A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.				
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0698 (enclose an extra copy of this form).				
Advance Order - # 0	r copies		Deposit Ac	count Number 50-0698	(enclose an extra	copy of this form).	
a. Applicant claims S	(from status indicated abov MALL ENTITY status. See	37 CFR 1.27.		cant is no longer claiming SMA			
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Iss ublication Fee (if required) ords of the United States Pa	ue Fee and Publicat will not be accepted tent and Trademark	tion Fee (if a from anyor Office.	any) or to re-apply any previous ne other than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in	
Authorized Signature	Palvin	zal		Date	March 03,	2006	
Typed or printed name	PAUL V	INCENT		Registration	n No. 37, 4	61	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	WEIHRAUCH, Georg) Examiner:
Application No.:	10/088,172) BAHTA, A.
Filing Date:	March 15, 2002) Art Unit:
For:	BRUSH, IN PARTICULAR) 1744
	TOOTH BRUSH	j

100111 BROSII

Atty. Docket Nr.: 18916.2 Issue Fee Due March 15, 2006

TRANSMITTAL LETTER FOR ISSUE FEE

MAIL STOP ISSUE FEE US PATENT AND TRADEMARK OFFICE Alexandria, VA 22313-1450 U.S.A.

Enclosures:

Form PTOL-85 Return Postcard

Letter to Draftsman

The Applicant is enclosing herewith Patent Office Form PTOL-85. Please charge Deposit Account Number 50-0698 in the amount of US \$ 1400 which covers payment of the Issue Fee for the above identified patent application.

The Commissioner is hereby authorized to charge payment of fees associated with this communication or credit any overpayment to Deposit Account Number 50-0698.

Respectfully submitted,

Dr. Paul Vincent

Reg. No. 37,461

Date

Lichti + Partner GbR Patentanwälte Postfach 41 07 60

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